

Express Mail Label No. EV682330625US Dated: October 5, 2006

Docket No.: MWS-029
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Donald Paul Orofino, II

Application No.: 10/637206

Confirmation Number: 4080

Filed: August 7, 2003

Art Unit: 2123

For: SYNCHRONIZATION AND DATA REVIEW
SYSTEM

Examiner: M. C. Jacob

SUBMISSION OF DRAWINGS

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith is one set (nine sheets, eighteen figures) of drawings for filing in the above-identified patent application. Kindly substitute the enclosed drawings for the drawings submitted with the originally filed application.

Dated: October 5, 2005

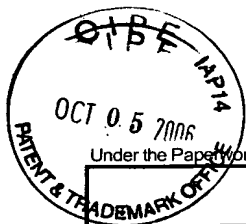
Respectfully submitted,

By 
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10-06-06

JW



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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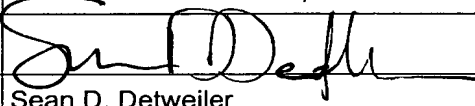
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/637206-Conf. #4080
		Filing Date	August 7, 2003
		First Named Inventor	Donald Paul OROFINO, II
		Art Unit	2123
		Examiner Name	M. C. Jacob
Total Number of Pages in This Submission		Attorney Docket Number	MWS-029

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard Replacement Sheet Submission of Drawings
<div style="border: 1px solid black; padding: 5px; min-height: 80px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Sean D. Detweiler		
Date	October 5, 2006	Reg. No.	42,482